Office for Substance Abuse Prevention

WHAT YOU CAN DO ABOUT

DRUG USE IN AMERICA

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administration

As part of the Drug-Free Communities Series, ***What You Can Do About Drug Use in America*** is a comprehensive overview of drug use and what we can do about it. This pamphlet is directed toward the individual, specifically toward parents, since change in the community needs to be reinforced by change at home.

For additional information, write to:

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20852

Feel free to copy this publication in any quantity that you wish.

DHHS Publication No. (ADM) 88-1572
Printed 1988

Faith Covenant UCC
from Emmetsburg
UCC July '96

What You Can Do About Drug Use In America

During this last year Americans have become concerned as never before about the dangers of alcohol and other drug use. Public opinion polls repeatedly indicate a general intolerance for the use of alcohol by minors and for the use of illegal drugs. Indicators show that most Americans are prepared to take a stand against such illegal alcohol and drug use.

The abuse of alcohol and the use of illegal drugs have ravaged families, and have infiltrated our streets, neighborhoods, and school yards. These problems have also invaded the workplace and the highway. The American public has finally said "We've had enough" and is joining forces against drug use.

This pamphlet is designed to help all Americans meet that challenge. It provides vital information about alcohol and other drugs, their physiological effects, and how we can help each other overcome the problems alcohol and other drugs can cause.

The first section explains what drugs are, how and why drug use can start, and the physical and psychological effects of drug use. After reading that material, you may want to know how to prevent alcohol and other drug problems among your family and friends, the topic of the next section. There you will find information on early education and how to prevent problems before they start. You will also learn about how you can set an example for those close to you and how you can teach children to resist pressure to use alcohol and other drugs. The section that follows explains how you can tell if someone you care about is having problems with alcohol and/or other drugs. This section not only explains the best steps to take to help but also gives you pointers on what you should not do. The last section provides a list of Federal, State, and private organizations you can turn to for help.

WHAT ARE DRUGS?

What Kinds of Drugs Are There?

There are many drugs that affect the mind or behavior, and they are either legal or illegal. Legal drugs are those that have been approved for sale either by prescription or over the counter. Alcohol, which is legally available in beverages except to those under legal drinking age, is a drug. Illegal drugs are those whose manufacture, sale, purchase for sale, or possession is prohibited by law. These include such drugs as marijuana, cocaine, PCP, and heroin—or those drugs approved but obtained by illegal means or used for illicit purposes.

Prescription drugs are drugs that have been determined to be safe, effective, and legal only when given under the direction of a licensed physician. Both the manufacture and dispensing of prescription drugs are regulated by laws enforced by the Food and Drug Administration, the Drug Enforcement Administration, and the individual States. If used improperly, people can become physically dependent upon some prescription drugs (for example, morphine and Valium).

Illegal drugs are sold and used against the law. They may harm those who use them—not only in terms of the physical and emotional damage they do directly, but also in terms of the criminal and financial consequences they bring. Many illegal drugs are manufactured clandestinely in the United States.

How and Why Does Drug Use Start?

How and why do people start using drugs? There is no one answer to that question, of course. In the case of many youths, however, their drug use starts in response to peer pressure. Youngsters naturally want to "fit in," to be accepted by their classmates or friends. However, research studies show that once involvement with drugs begins, such involvement all too often follows a predictable sequence leading to drug abuse.

Drug abuse often starts with the illicit use of legal drugs and with the use of alcohol (illegal for youth) and tobacco; users often progress from these substances to marijuana. Some users, including over half of the teenagers who use these substances, may eventually turn to other illegal drugs or combinations of drugs. For this reason, alcohol, tobacco, and marijuana are frequently called "gateway" drugs. Use of drugs such as cocaine and heroin is unusual in those who have not previously used alcohol, tobacco, and/or marijuana.

Drugs: What Are Their Physical and Psychological Effects?

Alcohol

Alcohol, a natural substance formed by the fermentation that occurs when sugar reacts with yeast, is the major active ingredient in wine, beer, and distilled spirits. Although there are many kinds of alcohol, the kind found in alcoholic beverages is ethyl alcohol. Whether one drinks a 12-ounce can of beer, a shot of distilled spirits, or a 5-ounce glass of wine, the amount of pure alcohol per drink is about the same—one-half ounce. Ethyl alcohol can produce feelings of well-being, sedation, intoxication, or

unconsciousness, depending on the amount and the manner in which it is consumed.

Alcohol is a "psychoactive" or mind-altering drug, as are heroin and tranquilizers. It can alter moods, cause changes in the body, and become habit forming. Alcohol is called a "downer" because it depresses the central nervous system. That's why drinking too much causes slowed reactions, slurred speech, and sometimes even unconsciousness (passing out). Alcohol works first on the part of the brain that controls inhibitions. As people lose their inhibitions, they may talk more, get rowdy, and do foolish things. After several drinks they may feel "high," but their nervous systems actually are slowing down.

A person does not have to be an alcoholic to have problems with alcohol. Every year, for example, many young people lose their lives in alcohol-related automobile accidents, drownings, and suicides. Serious health problems can and do occur before drinkers reach the stage of addiction or chronic use.

In some studies more than 25 percent of hospital admissions were alcohol-related. Some of the serious diseases associated with chronic alcohol use include alcoholism and cancers of the liver, stomach, colon, larynx, esophagus, and breast. Alcohol abuse also can lead to such serious physical problems as:

- ***Damage to the brain, pancreas, and kidneys***
- ***High blood pressure, heart attacks, and strokes***
- ***Alcoholic hepatitis and cirrhosis of the liver***
- ***Stomach and duodenal ulcers, colitis, and irritable colon***
- ***Impotence and infertility***
- ***Birth defects and Fetal Alcohol Syndrome, which causes retardation, low birth weight, small head size, and limb abnormalities***
- ***Premature aging***
- ***A host of other disorders, such as diminished immunity to disease, sleep disturbances, muscle cramps, and edema***

Marijuana

Contrary to many young people's beliefs, marijuana is a harmful drug, especially since the potency of the marijuana now available has increased more than 275 percent over the last decade. For those who smoke marijuana now, the dangers are much more serious than they were in the 1960s.

Preliminary studies have shown chronic lung disease in some marijuana users. There are more known cancer-causing agents in marijuana smoke than in cigarette smoke. In fact, because marijuana smokers try to hold the smoke in their lungs as long as possible, one marijuana cigarette can be as damaging to the lungs as four tobacco cigarettes.

New studies using animals also show that marijuana interferes with the body's immune response to various infections and diseases. This finding may have special implications for those infected with the Acquired Immune Deficiency Syndrome (AIDS) virus, Human Immunodeficiency Virus (HIV). Although not everyone infected with the virus gets the disease, those who use immune-weakening drugs such as marijuana may increase their risk for developing full-blown AIDS.

Even small doses of marijuana can impair memory function, distort perception, hamper judgment, and diminish motor skills. Chronic marijuana use can cause brain damage and changes in the brain similar to those that occur during aging. Health effects also include accelerated heartbeat and, in some persons, increased blood pressure. These changes pose particular health risks for anyone, but particularly for people with abnormal heart and circulatory conditions, such as high blood pressure and hardening of the arteries.

Marijuana can also have a serious effect on reproduction. Some studies have shown that women who smoke marijuana during pregnancy may give birth to babies with defects similar to those seen in infants born with Fetal Alcohol Syndrome—for example, low body weight and small heads.

More importantly, there is increasing concern about how marijuana use by children and adolescents affects both their short- and long-term development. Mood changes occur with the first use. Observers in clinical settings have noted increased apathy, loss of ambition, loss of effectiveness, diminished ability to carry out long-term plans, difficulty in concentrating, and a decline in school or work performance. Many teenagers who end up in drug treatment programs started using marijuana at an early age.

Driving under the influence of marijuana is especially dangerous. Marijuana impairs driving skills for at least 4 to 6 hours after smoking a single cigarette. When marijuana is used in combination with alcohol, driving skills become even more impaired.

Cocaine

Cocaine is one of the most powerfully addictive of the drugs of abuse—and it is a drug that can kill. No individual can predict whether he or she will become addicted or whether the next dose of cocaine will prove fatal. Cocaine can be snorted through the nose, smoked, or injected. Injecting cocaine—or injecting any drug—carries the added risk of contracting AIDS if the user shares a needle with a person already infected with HIV, the AIDS virus.

Cocaine is a very strong stimulant to the central nervous system, including the brain. This drug produces an accelerated heart rate while at the same time constricting the blood vessels, which are trying to handle the additional flow of blood. Pupils dilate and temperature and blood pressure rise. These physical changes may be accompanied by seizures, cardiac arrest, respiratory arrest, or stroke.

Nasal problems, including congestion and a runny nose occur with the use of cocaine, and with prolonged use the mucous membrane of the nose may disintegrate. Heavy cocaine use can sufficiently damage the nasal septum to cause it to collapse.

Research has shown that cocaine acts directly on what have been called the "pleasure centers" in the brain. These "pleasure centers" are brain structures that, when stimulated, produce an intense desire to experience the pleasure effects again and again. This causes changes in brain activity and, by allowing a brain chemical called dopamine to remain active longer than normal, triggers an intense craving for more of the drug.

Users often report feelings of restlessness, irritability, and anxiety, and cocaine can trigger paranoia. Users also report being depressed when they are not using the drug and often resume use to alleviate further depression. In addition, cocaine users frequently find that they need more and more cocaine more often to generate the same level of stimulation. Therefore, any use can lead to addiction.

"Freebase" is a form of cocaine that is smoked. "Freebase" is produced by a chemical process whereby "street cocaine" (cocaine hydrochloride) is converted to a pure base by removing the hydrochloride salt and some of the "cutting" agents. The end product is not water soluble, and so the only way to get it into the system is to smoke it.

"Freebasing" is extremely dangerous. The cocaine reaches the brain within seconds, resulting in a sudden and intense high. However, the euphoria quickly disappears, leaving the user with an enormous craving to freebase again and again. The user usually increases the dose and the frequency to satisfy this craving, resulting in addiction and physical debilitation.

"Crack" is the street name given to one form of freebase cocaine that comes in the form of small lumps or shavings. The term "crack" refers to the crackling sound made when the mixture is smoked (heated). Crack has become a major problem in many American cities because it is cheap—selling for between $5 and $10 for one or two doses—and easily transportable—sold in small vials, folding paper, or tinfoil.

PCP

PCP is a hallucinogenic drug; that is, a drug that alters sensation, mood, and consciousness and that may distort hearing, touch, smell, or taste as well as visual sensation. It is legitimately used as an anesthetic for animals. When used by humans, PCP induces a profound departure from reality, which leaves the user capable of bizarre behavior and severe disorientation. These PCP-induced effects may lead to serious injuries or death to the user while under the influence of the drug.

PCP produces feelings of mental depression in some individuals. When PCP is used regularly, memory, perception functions, concentration, and judgment are often disturbed. Used chronically, PCP may lead to permanent changes in cognitive ability (thinking), memory, and fine motor function.

Mothers using PCP during pregnancy often deliver babies who have visual, auditory, and motor disturbances. These babies may also have sudden outbursts of agitation and other rapid changes in awareness similar to the responses in adults intoxicated with PCP.

Heroin

Heroin is an illegal opiate drug. Its addictive properties are manifested by the need for persistent, repeated use of the drug (craving) and by the fact that attempts to stop using the drug lead to significant and painful physical withdrawal symptoms. Use of heroin causes physical and psychological problems such as shallow breathing, nausea, panic, insomnia, and a need for increasingly higher doses of the drug to get the same effect.

Heroin exerts its primary addictive effect by activating many regions of the brain; the brain regions affected are responsible for producing both the pleasurable sensation of "reward" and physical dependence. Together, these actions

account for the user's loss of control and the drug's habit-forming action.

Heroin is a drug that is primarily taken by injection (a shot) with a needle in the vein. This form of use is called intravenous injection (commonly known as IV injection). This means of drug entry can have grave consequences. Uncertain dosage levels (due to differences in purity), the use of unsterile equipment, contamination of heroin with cutting agents, or the use of heroin in combination with such other drugs as alcohol or cocaine can cause serious health problems such as serum hepatitis, skin abscesses, inflammation of the veins, and cardiac disease (subacute bacterial endocarditis). Of great importance, however, the user never knows whether the next dose will be unusually potent, leading to overdose, coma, and possible death. Of all illegal drugs, heroin is responsible for the greatest number of deaths.

Needle sharing by IV drug users is fast becoming the leading cause of new AIDS cases. It is conservatively estimated that one in six persons with AIDS probably acquired the virus through needle sharing. The AIDS virus is carried in contaminated blood left in the needle, syringe, or other drug-related implements and is injected into the new victim when he or she uses this equipment to inject heroin or other drugs. There is no cure for AIDS and no proven vaccine to prevent it.

Heroin use during pregnancy is associated with stillbirths and miscarriages. Babies born addicted to heroin must undergo withdrawal after birth and these babies show a number of developmental problems.

The signs and symptoms of heroin use include euphoria, drowsiness, respiratory depression (which can progress until breathing stops), constricted pupils, and nausea. Withdrawal symptoms include watery eyes, runny nose, yawning, loss of appetite, tremors, panic, chills, sweating, nausea, muscle cramps, and insomnia. Elevations in blood pressure, pulse, respiratory rate, and temperature occur as withdrawal progresses.

Symptoms of a heroin overdose include shallow breathing, pinpoint pupils, clammy skin, convulsions, and coma.

"Designer Drugs"

By modifying the chemistry structure of certain drugs, underground chemists have been able to create what are called "designer drugs"—a label that incorrectly glamorizes them. They are, in fact, analogs of illegal substances. Frequently, these drugs can be much more potent than the original substances, and they can therefore produce much more toxic effects. Health officials are increasingly concerned about "ecstacy," a drug in the amphetamine family that, according to some users, produces an initial state of disorientation followed by a rush and then a mellow, sociable feeling. We now know, however, that it also kills certain kinds of brain cells. These "designer drugs" are extremely dangerous.

How Can We Begin to Deal With THE PROBLEM OF DRUG ABUSE?

How Can I Tell If Someone I Know Is Using Drugs?

Aside from the physical effects of drugs discussed in the preceding section, certain warning signs may indicate that a family member or friend is drinking too much alcohol or using other drugs. Although these warning signs are not foolproof, each by itself or many signs combined over time should be cause for concern.

With alcohol, some of the signs to look for are:

- *Does the person pour a drink as an immediate reaction when faced with any problem?*
- *Does the person drink until intoxicated?*
- *Is there a record of missed work because of drinking or an ill-disguised odor of alcohol on the breath during work hours even though attendance may be regular?*
- *Does the person drive a car while intoxicated?*
- *Has his or her home life become intolerable because of drinking or arguments resulting from drinking?*
- *Does he or she handle all social celebrations and stress with alcohol?*

These are the signs of an adult problem drinker. It is important to note, however, that any use of alcohol by youth is abuse and cause for concern.

When these signs are present, it means that a person's drinking pattern, if not already out of control, is heading that way. **A person does not have to be an alcoholic to have problems with alcohol.**

There are numerous signs of illegal drug use. For example, when a person is carrying drugs or has them hidden around the house, there is a strong possibility of use. Obviously, possession of drug paraphernalia also is a likely sign of use.

Indications of prescription drug misuse vary according to the type of drug in question. Drug misuse may lead to dependence and withdrawal symptoms can be severe if drug use is stopped suddenly.

Certain additional behavioral characteristics also seem to accompany the use of alcohol and other drugs. The clues can be found in all people who abuse these substances, regardless of age. Examples of these clues include:

- *An abrupt change in mood or attitudes*
- *Sudden and continuing decline in attendance or performance at work or in school*
- *Sudden and continuing resistance to discipline at home or in school*
- *Impaired relationships with family members or friends*
- *Unusual temper flare-ups*
- *Increased borrowing of money from parents or friends*
- *Stealing from the home, at school, or in the workplace*
- *Heightened secrecy about actions and possessions*
- *Associating with a new group of friends, especially with those who use drugs*

How Can I Come To Grips With My Problem?

If you have an alcohol or drug problem, you need to do three things immediately. First, admit it to yourself. Acknowledge that you do have a problem and that something must be done.

Second, contact a group that can recommend or provide treatment and moral support. (See the back of this pamlet for a list of such organizations.)

Third, admit your problem to the members of your family. Mobilize the strength of the family unit to help provide the support you will need to address your reasons for use and the difficulties of addiction.

How Can I Help A Family Member Or A Friend?

If someone confides in you that he or she has a problem with alcohol or other drugs, some ways of dealing with this situation clearly work better than others. You should try to be:

- ***Understanding—listen to reasons why he or she uses/abuses alcohol or other drugs***
- ***Firm—explain why you feel that use of alcohol or other drugs is harmful, and why this individual needs to seek counseling and treatment***
- ***Supportive—assist the user in finding help and providing moral support through the tough times ahead***
- ***Self-examining—ask yourself whether you have provided a good role model***

Actions that you should avoid include being:

- ***Sarcastic***
- ***Accusatory***
- ***Stigmatizing***
- ***Sympathy Seeking for Yourself***
- ***Self-blaming***

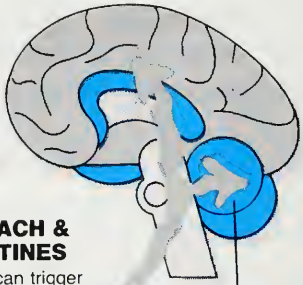
Intervening in the case of a family member or friend who is a problem drinker can be very difficult and hurtful. The person with the problem will most likely deny the problem and try to put you on the defensive—"I thought you were my friend; are you calling me a drunk?" In a case such as this, what you don't do is as important as what you should do:

- ***Avoid emotional appeals, which may only increase feelings of guilt and the compulsion to drink***

THE EFFECTS OF ALCOHOL

THE BRAIN

Brain cells are altered, and may die. Memory formation is blocked, and the senses are dulled. In the long term, irreversible damage occurs.



CEREBELLUM

Physical coordination is impaired.

STOMACH & INTESTINES

Alcohol can trigger bleeding, and has been linked to cancer.

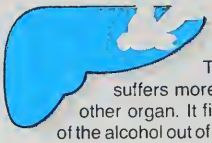
HEART

Deterioration of the heart muscle can occur.

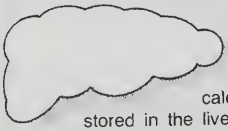
THE IMMUNE SYSTEM

Infection-fighting cells are prevented from functioning properly, and the risk of viral or bacterial diseases is increased.

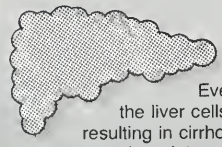
THE LIVER



The liver suffers more than any other organ. It filters most of the alcohol out of the bloodstream and breaks it down. Because of its high caloric content, alcohol displaces key nutrients, sometimes causing malnutrition.



Excess calories are stored in the liver as fat. This is one of the earliest signs of alcoholic liver disease.



Eventually the liver cells die resulting in cirrhosis, a degeneration of the organ.

REPRODUCTION

In men hormone levels change, causing lower sex drive and enlarged breasts. Women's menstrual cycles become irregular, and their ovaries malfunction. Pregnant women face the risk of bearing children with birth defects.

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Diagram by Joe Lertola

- *Don't cover up or make excuses for the person*
- *Don't take over his or her responsibilities, which will leave the person with no sense of importance or dignity*
- *Don't argue with the person when he or she is drunk*
- *Don't hide or dump bottles or shelter the problem drinker from situations where alcohol is present*
- *Above all, don't accept responsibility for the person's actions nor guilt for his or her drinking*

Four Basic Stages Of Alcohol and Other Drug Use

Stage 1

The first stage is experimentation. Too many youngsters and adults believe that experimenting with drugs is safe. For youths, experimentation with substances such as tobacco and alcohol is often unfortunately viewed as normal. However, because young bodies are particularly susceptible to alcohol and other drugs and their effects, there is no such thing as totally "safe" use of any mind-altering drug by a youngster. In stage one, however, there may be no outward behavioral changes caused by the use of drugs.

Stage 2

The second stage involves more frequent use of drugs as the person actively seeks the euphoric effects of a mind-altering drug. At this point, the user usually establishes a reliable drug source, and may add mid-week use of drugs to previous habits of weekend use at parties. Among adolescents, significant clues now include changes in friends, deterioration of school performance, and possibly a general lack of motivation.

Stage 3

In stage three, there is intense preoccupation with the desire to experience the effects of the drug. Daily use of mind-altering drugs occurs. Depression and thoughts of suicide are common. Family troubles increase and the adolescent may be having problems with the law.

Stage 4

In the fourth stage, increasing levels of the drug are needed just to feel OK. Physical signs such as cough, sore throat, weight loss, and fatigue—which may have begun to appear earlier—are now common. Blackouts and overdosing also are more common, family life is a disaster, and crime may be becoming a way of life to obtain money to buy drugs.

How Can I Keep My Family Free From Problems Caused By ALCOHOL AND OTHER DRUGS?

What Early Education Information Do I Need?

Knowledge is a powerful weapon against drugs. The information contained in this pamphlet represents a good start in your educational efforts. However, to increase your understanding of drugs and their effects you should read some additional material.

In addition to some excellent information available from private sources, the Federal government has compiled a great deal of information about the effects of alcohol abuse and other drug use and the successful strategies that can be used to combat these problems. Free materials may be obtained from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, Maryland 20852.

How Can I Set an Example?

First and foremost, set an example by not using illegal drugs or misusing alcohol or prescription drugs. Period. No excuses or self-exceptions should be offered to yourself or to others. If alcohol is used, it should be used only by persons of legal age and only in moderation; prescription drugs should only be used when prescribed; and you should abstain from the use of any illegal drugs.

Also, don't keep illegal drugs in the house and don't allow their use in your home by others. Let your family and friends know that drugs are not acceptable in your home. You can let others know that you will not tolerate illegal drugs at parties that you or your family attend. Let others know that drug use is not to be tolerated on your streets or anywhere else near you.

The best way to keep your family from abusing alcohol (any use of alcohol by youth is abuse) is by carefully looking at the example set in your home. Are your parties, entertainment, and celebrations centered around alcohol? Do you reach for a drink whenever you want to relax or to deal with any problem that comes up? Such behavior sends the wrong signal—that alcohol is needed to have a good time or to cope with daily living.

How Can I Help My Younger Children To Say "No"?

First, talk to your child about alcohol and other drugs. Carefully explain the health consequences of alcohol and other drug use, and the dramatic effect they can have on a child's life and preparation for the future. Correct mistaken ideas perpetuated by peers and the media. And really listen carefully to your child talk about alcohol and other drugs. Children are more likely to communicate when they receive positive verbal and nonverbal cues that show parents are listening.

Second, help your child to develop a healthy self-image. Self-regard is enhanced when parents praise effort as well as accomplishments. In turn, when being critical, criticize the actions and not the person.

Third, help your child develop a strong system of values. A strong value system can give children the criteria and courage to make decisions based on facts rather than pressure from friends.

Fourth, help your child deal with peer pressure. Explain that saying "No" can be an important statement about self-worth. Help your child practice saying "No." Together, set out the reasons for saying "No" and discuss why it is beneficial to avoid alcohol and other drugs.

Fifth, make family policies that help your child to say "No." The strongest support your child can have in refusing to use alcohol and other drugs is to be found in the solid bonds created within the family unit. Always chaperone your children's parties. It is helpful when parents let other family members—and friends—know that drug use, and use of alcohol by minors, is a violation of the rules by which the family will operate, and that their use of alcohol and other drugs is simply unacceptable within the family. The consequences and punishment for such a violation must be clearly spelled out.

Sixth, encourage your child to join an anti-drug club. With over 10,000 clubs nationwide, chances are that your child's school has such a club. If not, it might be a good idea to contact the local principal about starting a club. These clubs help develop positive peer pressure, strengthening children's ability to say "No," and the clubs teach the harmful effects of alcohol and other drugs on children's bodies.

Finally, encourage healthy, creative activities that may help to prevent children from using alcohol and other drugs. Help your child live such a full life that there is no time nor place for alcohol and other drugs. Meet the parents of your child's friends and classmates and encourage alcohol- and other drug-free alternative activities. Learn about drugs and share a "no use" of alcohol or other drugs for youth message. Discuss guidelines and problem areas and agree to keep in touch. Consider forming parent-peer groups. There is strength in numbers. Making these contacts before there is a problem often prevents the problem from ever developing. When the entire peer group is on the right track, you stand a better chance of keeping your child drug free.

WHERE CAN I GO FOR HELP?

Sometimes the quickest way to find out what help is available in your local area is to join a group such as Al-Anon. Al-Anon is a group of family members and friends of problem drinkers who meet to share practical suggestions on day-to-day living with someone who has a drinking problem. These family members and friends of problem drinkers usually know where help is available in your community.

Here are some specific sources of help and information.

TOLL-FREE NUMBERS

1-800-662-HELP
National Institute on Drug Abuse
Information and Referral Line
Monday through Friday,
8:30 a.m.-4:30 p.m.

1-800-554-KIDS
The National Federation of Parents for Drug-Free Youth
Monday through Friday,
9:00 a.m.-5:00 p.m.

1-800-241-9746
Parent's Resource Institute for Drug Education (PRIDE)
Monday through Friday,
8:30 a.m.-5:00 p.m.
(Recorded service other times)

1-800-Cocaine
Cocaine Helpline
Monday through Friday,
9:00 a.m.-3:00 a.m.
Saturday and Sunday,
12:00 p.m.-3:00 a.m.

1-800-843-4971
The National Institute on Drug Abuse Workplace Helpline
(For employers establishing workplace drug abuse programs)
Monday through Friday,
9:00 a.m.-8:00 p.m.

1-800-622-2255
National Council on Alcoholism
7 days a week, 24 hours a day

For information on where to find treatment for alcohol problems, the best place to look is in the telephone book's Yellow Pages under "Alcohol." Usually there is a listing of the nearest Council on Alcoholism (or Council on Alcohol and Drug Abuse). These Councils provide information over the phone on the availability of the nearest alcohol treatment programs. Alcoholics Anonymous (AA) is also listed in the Yellow Pages under "Alcoholism." AA can be of immeasurable help in enabling a person to cope with a drinking problem.

For further information, write to:

National Clearinghouse for
Alcohol and Drug Information
P.O. Box 2345
Rockville, Maryland 20852
(301) 468-2600

STATE ORGANIZATIONS

Alabama
Division of Mental Illness
and Substance Abuse
Community Programs
Department of Mental Health
P.O. Box 3710
Montgomery 36193
(205) 271-9209

Alaska
Office of Alcoholism and
Drug Abuse
Department of Health and Social
Services
Pouch H-05-F
Juneau 99811
(907) 586-6201

Arizona
Office of Comm. Behav. Health
Department of Health Services
701 East Jefferson
Suite 400A
Phoenix 85034
(502) 255-1152

Arkansas
Office on Alcohol and
Drug Abuse Prevention
Donaghey Plaza North
Suite 400
P.O. Box 1437
Little Rock 72203-1437
(501) 682-6650

California
Department of Alcohol and
Drug Programs
111 Capitol Mall
Suite 450
Sacramento 95814
(916) 445-0834

Colorado
Alcohol and Drug
Abuse Division
Department of Health
4210 East 11th Avenue
Denver 80220
(303) 331-8201

Connecticut
Alcohol and Drug Abuse
Commission
999 Asylum Avenue
Hartford 06105
(203) 566-4145

Delaware
Bureau of Alcoholism and
Drug Abuse
1901 North DuPont Highway
Newcastle 19720
(302) 421-6101

District of Columbia
Health Planning and
Development
1875 Connecticut Avenue, N.W.
Suite 836
Washington 20009
(202) 673-7481

Florida
Alcohol and Drug
Abuse Program
Department of Health and
Rehabilitative Services
1317 Winewood Boulevard
Tallahassee 32301
(904) 488-0900

Georgia
Alcohol and Drug
Services Section
878 Peachtree Street, N.E.
Suite 318
Atlanta 30309
(404) 894-6352

Hawaii
Alcohol and Drug Abuse Branch
Department of Health
P.O. Box 3378
Honolulu 96801
(308) 548-4280

Idaho
Bureau of Substance Abuse and
Social Services
Department of Health and
Welfare
450 West State Street
Boise 83720
(208) 334-5935

Illinois
Department of Alcoholism and
Substance Abuse
100 West Randolph Street
Suite 5-600
Chicago 60601
(312) 917-3840

Indiana
Division of Addiction Services
Department of Mental Health
117 East Washington Street
Indianapolis 46204
(317) 232-7816

Iowa
Department of Public Health
Division of Substance Abuse and
Health Promotion
Lucas State Office Building
Des Moines 50319
(515) 281-3641

Kansas
Alcohol and Drug
Abuse Services
2700 West Sixth Street
Biddle Building
Topeka 66606
(913) 296-3925

Kentucky
Division of Substance Abuse
Department for Mental Health
Mental Retardation Services
275 East Main Street
Frankfort 40621
(502) 564-2880

Louisiana
Office of Prevention and
Recovery from Alcohol and Drug
Abuse
2744 B Woodale Boulevard
Baton Rouge 70805
(504) 922-0730

Maine
Office of Alcoholism and
Drug Abuse Prevention
Bureau of Rehabilitation
State House Station #11
Augusta 04333
(207) 289-2781

Maryland
State Drug Abuse Administration
201 West Preston Street
Baltimore 21201
(301) 225-6926

Massachusetts
Division of Substance
Abuse Services
150 Tremont Street
Boston 02111
(617) 727-8614

Michigan
Office of Substance
Abuse Services
Department of Public Health
3423 North Logan Street
P.O. Box 30035
Lansing 48909
(517) 335-8809

Minnesota
Chemical Dependency Program Division
Department of Human Services
Centennial Building
658 Cedar Street
St. Paul 55155
(612) 296-4610

Mississippi
Division of Alcohol and Drug Abuse
Department of Mental Health
State Office Building
1500 Woolfolk
Jackson 39201
(601) 359-1297

Missouri
Division of Alcohol and Drug Abuse
Department of Mental Health
1915 South Ridge Drive
P.O. Box 687
Jefferson City 65102
(314) 751-4942

Montana
Alcohol and Drug Abuse Division
Department of Institutions
Helena 59601
(406) 444-2827

Nebraska
Division of Alcoholism and Drug Abuse
Department of Public Institutions
P.O. Box 94728
Lincoln 68509
(402) 471-2851, Ext. 5583

Nevada
Bureau of Alcohol and Drug Abuse
Department of Human Resources
505 East King Street
Carson City 89710
(702) 885-4790

New Hampshire
Office of Alcohol and Drug Abuse Prevention
Health and Welfare Building
Hazen Drive
Concord 03301
(603) 271-4627

New Jersey
Division of Alcoholism
129 East Hanover Street
Trenton 08625
(609) 292-8947

Division of Narcotic and Drug Abuse Control
129 East Hanover Street
Trenton 08625
(609) 292-5760

New Mexico
Substance Abuse Bureau
Behavioral Health Services Division
P.O. Box 968
Santa Fe 87504
(505) 827-0117

New York
Division of Alcohol and Alcohol Abuse
194 Washington Avenue
Albany 12210
(518) 474-5417

Division of Substance Abuse Services
Executive Park South
P.O. Box 8200
Albany 12203
(518) 457-7629

North Carolina
Alcohol and Drug Abuse Section
Division of Mental Health and Mental Retardation Services
325 North Salisbury Street
Raleigh 27611
(919) 733-4670

North Dakota
Division of Alcoholism and
Drug Abuse
Department of Human Services
State Capitol/Judicial Wing
Bismarck 58505
(701) 224-2769

Ohio
Bureau on Alcohol Abuse and
Recovery
Department of Health
170 North High Street
Columbus 43266-0586
(614) 466-3445

Bureau on Drug Abuse
Department of Health
170 North High Street
Columbus 43266-0586
(614) 466-7893

Oklahoma
Alcohol and Drug Programs
Department of Mental Health
P.O. Box 53277
Capitol Station
Oklahoma City 73152
(405) 271-7474

Oregon
Office of Alcohol and Drug
Abuse Programs
301 Public Service Building
Salem 97310
(503) 378-2163

Pennsylvania
Deputy Secretary for
Drug and Alcohol Programs
Department of Health
P.O. Box 90
Harrisburg 17108
(717) 787-9857

Rhode Island
Division of Substance Abuse
Substance Abuse Administration
Building
Cranston 02920
(401) 464-2091

South Carolina
Commission on Alcohol and
Drug Abuse
3700 Forest Drive
Columbia 29204
(303) 734-9520

South Dakota
Division of Alcohol and
Drug Abuse
523 East Capitol
Pierre 57501
(605) 773-3123

Tennessee
Alcohol and Drug
Abuse Services
Department of Mental Health
and Mental Retardation
706 Church Street
Nashville 37219
(615) 741-1921

Texas
Commission on Alcohol and
Drug Abuse
1705 Guadalupe Street
Austin 78701
(512) 463-5510

Utah
Division of Alcoholism
and Drugs
150 West North Temple
Suite 350
P.O. Box 2500
Salt Lake City 84110
(801) 538-3939

Vermont
Office of Alcohol and
Drug Abuse Programs
103 South Maine Street
Waterbury 05676
(802) 241-2170, 241-1000

Virginia
Office of Substance
Abuse Services
Department of Mental Health
and Mental Retardation
P.O. Box 1797
109 Governor Street
Richmond 23214
(804) 786-3906

Washington
Bureau of Alcoholism and
Substance Abuse
Department of Social and
Health Services
Mail Stop OB-44W
Olympia 98504
(206) 753-5866

West Virginia
Division of Alcohol and
Drug Abuse
State Capitol
Room 451
1800 Washington Street, East
Charleston 25305
(304) 348-2276

Wisconsin
Office of Alcohol and
Other Drug Abuse
1 West Wilson Street
P.O. Box 7851
Madison 53707
(608) 266-3442

Wyoming
Alcohol and Drug
Abuse Programs
Hathaway Building
Cheyenne 82002
(307) 777-7115, Ext. 7118

Guam
Department of Mental Health
and Substance Abuse
P.O. Box 8896
Tamuning 96911
(671) 477-9704

Puerto Rico
Department of Anti-
Addiction Services
Box B-Y, Rio Piedras Station
Rio Piedras 00928
(809) 764-3795

Virgin Islands
Division of Mental Health,
Alcoholism and
Drug Dependency
P.O. Box 520
St. Croix 00820
(809) 773-1992

American Samoa
Human Services Clinic
Public Health Services
Alcohol and Drug Programs
LBJ Tropical Medical Center
Pago Pago 96799

Trust Territories
Health Services
Office of the High Commissioner
Saipan 96950

PRIVATE ORGANIZATIONS, CIVIC GROUPS, RELIGIOUS ORGANIZATIONS

Al-Anon/Alateen Family Group Headquarters
P.O. Box 862
Midtown Station
New York, New York 10018
(212) 302-7240

Alcoholics Anonymous
Box 459, Grand Central Station
New York, New York 10163
(212) 473-6200

American Council for Drug Education
204 Monroe Street
Rockville, Maryland 20850
(301) 294-0600

The Chemical People/WQED
4802 Fifth Avenue
Pittsburgh, Pennsylvania 15213
(412) 622-1491

Coalition of Hispanic Health and Human Services Organizations (COSSMHO)
1030 15th Street, N.W.
Suite 1053
Washington, D.C. 20005
(202) 371-2100

COCANON Family Groups
P.O. Box 64742-66
Los Angeles, California 90064
(213) 859-2206

Families Anonymous, Inc.
P.O. Box 528
Van Nuys, California 91408
(818) 989-7841

Families in Action Drug Information Center
3845 N. Druid Hills Road
Suite 300
Decatur, Georgia
(404) 325-5799

Institute on Black Chemical Abuse
2614 Nicollet Avenue
Minneapolis, Minnesota 55408
(612) 871-7878

Just Say No Foundation
1777 North California Blvd.
Room 200
Walnut Creek, California 94596
(415) 939-6666

Mothers Against Drunk Driving Central Office
669 Airport Freeway
Suite 310
Hurst, Texas 76053
(817) 268-6233

Nar-Anon Family Group Headquarters World Service Office
P.O. Box 2562
Palos Verdes Peninsula,
California 92704

National Asian Pacific American Families Against Drug Abuse
6303 Friendship Court
Bethesda, Maryland 20817
(301) 530-0945

National Association for Children of Alcoholics
31706 Coast Highway
Suite 201
South Laguna,
California 92677
(714) 499-3889

National Association of State Alcohol and Drug Abuse Directors
444 N. Capitol Street, N.W.
Suite 530
Washington, D.C. 20001
(202) 783-6868

National Black Organizations Against Alcohol and Drug Use
22 Chapel Street
Brooklyn, New York 11201

National Clearinghouse for the Prevention of Drug and Alcohol Abuse
c/o The Quest
National Center
6655 Sharon Woods Boulevard
Chicago, Illinois 60611
(312) 787-0977

National Federation of Parents for Drug-Free Youth
8730 Georgia Avenue
Suite 200
Silver Spring, Maryland 20910
(800) 554-5437

National Parents Resource Institute for Drug Education (PRIDE)
Robert W. Woodruff Volunteer Service Center
100 Edgewood Avenue
Suite 1002
Atlanta, Georgia 30303
(404) 651-2548

National Prevention Network
444 North Capitol Street, N.W.
Suite 530
Washington, D.C. 20001
(202) 783-6868

☆ U.S. GOVERNMENT PRINTING OFFICE: 1988—217-151

Other publications available in the

Drug-Free Communities Series

One by One:

Helping Communities to Help Themselves

A brochure that calls individuals to action and to make a commitment to participate in creating protective, drug-free communities for youth.

Drug-Free Communities:

Turning Awareness Into Action

A booklet that examines the cultural and community attitudes, norms, and environmental factors that encourage the use of alcohol and other drugs. Persons interested in prevention are given help in getting started.

Prevention Plus 2:

Tools for Creating and Sustaining a Drug-Free Community

A technical assistance manual for organizing or expanding community alcohol and drug prevention activities for youth into a coordinated, complementary system. Written for persons from throughout the community who are in a position to assist in organizing a prevention effort.

Expected to be available Spring 1989

Printed by the Office for Substance Abuse Prevention
and distributed by the
National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20852

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DHHS Publication No. (ADM) 88-1572
Printed 1988